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**APPLICANTS**  
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**\*\* CONTINUING DATA \*\*\*\*\***  
THIS APPLICATION IS A CIP OF PCT/US99/22955 10/13/1999,  
WHICH CLAIMS BENEFIT OF 60/104,585 10/16/1998  
AND CLAIMS BENEFIT OF 60/107,466 11/06/1998  
AND CLAIMS BENEFIT OF 60/149,010 08/13/1999

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED**  
\*\* 06/07/2001

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY WA	SHEETS DRAWING 24	TOTAL CLAIMS 30	INDEPENDENT CLAIMS 4
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Verified and Acknowledged  
Examiner's Signature: [Signature] Initials: [Initials]

**ADDRESS**  
22932

**TITLE**  
Inhibitors of platelet activation and recruitment

<b>FILING FEE RECEIVED</b> 1100	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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